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U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE
the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number 10/016,631 Filing Date TRANSMITTAL November 1, 2001 First Named Inventor **FORM** Andre F. A. FOURNIER Art Unit 2684 **Examiner Name** Talihun B. Gesesse (to be used for all correspondence after initial filing) Attorney Docket Number 44375/24:1 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC 1 Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers of Appeals and Interferences Fee Attached Appeal Communication to TC |√| (Appeal Notice, Brief, Reply Brief) Amendment/Reply Petition to Convert to a Proprietary Information After Final Provisional Application Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Identify Terminal Disclaimer below): **Extension of Time Request** Return receipt postcard. Request for Refund **Express Abandonment Request** CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) The request for an extension of time is found in the Amendment/Reply. Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Stoel Rives LLP, 900 SW Fifth Avenue, Suite 2600, Portland, Oregon 97204 Signature Printed name Micah D. Stolowitz Reg. No. Date November 14, 2005 32,758 **CERTIFICATE OF TRANSMISSION/MAILING** I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature Date November 14, 2005 George Painter Typed or printed name

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PTO/SB/17 (12-04v2)

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Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  FEE TRANSMITTAL  For FY 2005				Complete if Known				
				Application Number 10/0		10/016,631	/016,631	
				Filing Date		November 1, 2001		
				First Named Inve	entor	Andre F. A. FOURNIER		
				Examiner Name		Talihun B. Gesesse		
Applicant claims small entity status. See 37 CFR 1.27				Art Unit		2684		
TOTAL AMOUNT OF PAYN	IENT (\$)	405.00		Attorney Docket	No.	44375/24:1		
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
Deposit Account Deposit Account Number: 19-4455 Deposit Account Name: Stoel Rives LLP								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments  under 37 CFR 1.16 and 1.17								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES								
Application Type	Fee (\$)	mall Entity	Fee (\$)	Small Entity	Fee	Small Entity	Fees Paid (\$)	
Utility	300	<u>Fee (\$)</u> 150	500	Fee (\$) 250	200		<u> </u>	
Design	200	100	100	50	130			
Plant	200	100	300	150	160			
Reissue	300	150	500	250	600			
Provisional	200	100	0	0	000			
2. EXCESS CLAIM FEE		100	U	U	U	ū	Small Entity	
Fee Description Fee (\$) Fee (\$)								
Each claim over 20 (including Reissues)						50	25 100	
Each independent claim over 3 (including Reissues)						200 360	180	
Multiple dependent claims  Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)							endent Claims	
10tal Claims Extra Claims ree (5) ree Patt (5)  41 - 20 or HP = 0 x 25.00 = 0.00						Fee (\$)	Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20.								
Indep. Claims								
HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)  - 100 = / 50 = (round up to a whole number) x =								
4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): Petition fee for IDS and Two-month Extension of Time 405.00								
SUBMITTED BY								
Signature Registration No. 22.759 Telephone (503) 204 0189								

1 word (Attomey/Agent) Date November 14, 2005 Name (Print/Type) Micah D. Stolowitz

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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